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S&H Form: PTO/SB/05 (2/02) Attorney Docket No. 1690.1010 UTILITY PATENT APPLICATION First Named Inventor or Application Identifier: Adolf WEIGL **TRANSMITTAL** Express Mail Label No. (Only for original applications) ADDRESS TO: APPLICATION ELEMENTS **Commissioner for Patents** See MPEP chapter 600 concerning utility patent application contents. **Box Patent Application** PO Box 1450 Alexandria, VA 22313-1450 1. 🛛 Fee Transmittal Form 2. Specification, Claims & Abstract[Total Pages: 31] Drawing(s) (35 USC 113)[Total Sheets: 4] [FIGS. 1-8 ___] 3. 4. □ Oath or Declaration [Total Pages: __] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Claiming Small Entity Status 5. 6. □ Application Data Sheet. See 37 C.F.R. 1.76 International Patent Application PCT/DEO3/02757 filed August Applicant claims foreign priority benefit to: 7. 18, 2003 8. CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) 9. a. Computer Readable Form (CRF) b.

Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or II. paper c.

Statement verifying identity of above copies 10. 🗌 For publication of assignee information under 37 CFR 1.215(b), list the assignee as of . The Assignment papers will be filed later. ACCOMPANYING APPLICATION PARTS Assignment (cover sheet & document(s)) to of for publication of assignee information under 37 CFR 1.215(b) 12. 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney 13. English Translation Document (if applicable) 14. Information Disclosure Statement (IDS)/PTO-1449 15. Preliminary Amendment 16. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 17. Certified Copy of Priority Document(s) (if foreign priority is claimed) 18. Request and Certification for Nonpublication under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 19. Other: 20. CORRESPONDENCE ADDRESS



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S&H Form (10/03)

NEW APPLICATION			Attorney Docket No. 16			1690	0.1010			
FEE TRANSMITTAL			Application Number			Unassigned				
							ary 20, 2004			
AMOUNT ENCLOSED \$ 0.00						f WEIGL				
FEE CALCULATION (fees effective 10/01/03)										
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS			
	TOTAL CLAIMS	91 - 20 =	71		X \$ 18.00 =		\$ 1278.00			
	INDEPENDENT CLAIMS	11 - 3 =	8		X \$ 86.00 =		688.00			
	MULTIPLE DEPEN	IDENT CLAIMS	(any number; + \$290.00 =				290.00			
			BASIC FILING FEE				770.00			
)	\$ 3,026.00						
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